

TOTAL

Waste Management Form - Part I





Required for projects described in Municipal Code §66.0601-66.0610.

Deposit will be fully refunded if at least 50%* of ALL debris generated from the project is recycled. If the minimum required recycling rate is not met, the deposit refund will be prorated. Deposit refund requests must be accompanied by weigh tickets for ALL debris generated, including all trash, salvage, reuse and recycling, and be submitted within 180 days from final inspection. Refer to Information Bulletin 119 for details on acceptable documentation.

Submit this form and your deposit to the Development Services Department staff at permit issuance.

Complete Part I before obtaining a building, combination or demolition permit.

Refundable Party Conta	ect Information:					
Name	Title Company					
Address			City	State	Zip	
Phone	1	Email				
Project Information:						
Approval/Permit No	Proj	ect Title				
Project Address				Zip		
Project Type:	struction 📮 Additi	on/Alteration 🏻 🗖	Demolition			
Building Type:	rcial 📮 Residenti	al				
Estimated Square Feet		TO BE FILLED OUT BY DSD STAFF				
•	Date "ConDebris Deposit" Paid \$					
Estimated Completion Date			Invoice # Date Paid			
Fill out the table with <u>esti</u>						
Please use the City Construct	ction ana Demoution	Debris Conversion	i Table if converting	g from volume to ton	nage.	
Material Type	A Estimated Salvage, Reuse or Recycle		C Estimated Total Debris Quantity	Hauler	Certified Recycling Facility or Disposal Destination	
Asphalt & Concrete						
Brick / Masonry / Tile						
Cabinets, Doors, Fixtures,						
Windows (circle all that apply) Cardboard						
Carpet, Padding / Foam						
Ceiling Tile (acoustic)						
Dirt						
Drywall						
Landscape Debris						
Mixed C&D Debris						
Mixed Inerts						
Roofing Materials						
Scrap Metal						
Stucco						
Unpainted Wood & Pallets						
Garbage / Trash						
Other:						

To estimate Recycling Rate: (Total A/Total C) x 100 = Recycling % MINIMUM RECYCLING RATE FOR ALL DEBRIS FROM YOUR PROJECT IS CURRENTLY 50%*

* Recycling rate is subject to change; check Information Bulletin 119 for current rate.

C&D debris may contain paint, asbestos, mercury switches, light bulbs, ballasts or other hazardous wastes that require removal prior to disposal. The Miramar Landfill cannot accept hazardous waste. For information on waste acceptance at the Miramar Landfill, call (858) 694-7000.



Waste Management Form - Part II Construction & Demolition Debris Deposit Program



Required for project	ects described in Munici	pal Code §66.0601-66	5.0610.		
Complete Part II after final inspection. Submit with ALL trash, salvage, reuse and recycling weigh tickets. Please refer to Information Bulletin 119 for details on acceptable documentation.					
Send this completed form and all documentat	ion:				
By Mail City of San Diego Environmental Services Department Attn: C&D Diversion Coordinator 9601 Ridgehaven Court, Suite 320 San Diego, CA 92123-1636	By Fax Attn: C&D Divers (858) 492-5089	ion Coordinator	By Email ESD_CD@sandiego.gov		
Applicants must submit refund requests with days will not be eligible for a refund. Refund provided. Refunds will be mailed within 45 to the minimum required recycling rate specified	ls will not be issued if business days followin	all requested inform ag receipt of all prope	nation and documentation is not er forms and documentations. If		
Project Information					
Approval/Permit No Project	ct No	Project Title			
Final Inspection Date/ P	roject Address				
Affirmation Applicant is advised of San Diego Municipal false statement or fail to report any material faother City action under the provisions of the SI certify under penalty of perjury under the latest control of the SI certify under penalty of perjury under the latest certify under the latest certification.	act in any application San Diego Municipal (ws of the State of Cali	for City license, peri Code." Ifornia that the inform	mit, certificate, employment or mation provided in and with this		
form pertains to construction and demolition of the accuracy of the information, and that the i	•	1 0			
Name T	Title	Compan	y		
Signature					
Payment Information Check will be made payable to the Refundabl on which the "ConDebris Deposit" was assess If payment is to be made to a different pay	sed. Please provide coarty, the Refundable	omplete mailing addi Party must sign in	ress below.		
whom the check will be payable, and pro	vide complete mailin	g address.			
By signing my name, I Refundable Party on inv	voice (print name)	Company	,, Signature		

For more information, please contact the City of San Diego Environmental Services Department: (858) 694-7000 or visit www.recyclingworks.com

__ City _____

__ State ____ Zip+4 __

authorize the refund check to be made payable to: _

Refund Mailing

Address_